

IN THE CLAIMS:

Original claims 1-42 have been replaced with new claims 1-22.

REMARKS

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Claims 1-42 in the parent application (S/N 09/201,953) were subject to a Restriction Requirement between the following groups:

Group:	Claims:	Description:
I	1-16 and 19-42	Method for manufacturing a
		vascular graft
II	17-18	Endovascular graft system and
		method of implantation

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Group I claims were prosecuted in the parent application. New claims 1-22 submitted herewith are drawn to a vascular graft.

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The changes to the Abstract are indicated in the attached Appendix.

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Respectfully submitted,



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PTO Reg. No. 38,022

PATENT COUNSEL

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Under 37 C.F.R. 1.34(a)

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APPENDIX

The following shows the changes made to the Abstract:

5 A ~~method for improving the radial enlargeability and other~~
~~properties of tape-reinforced tubular vascular graft formed of sintered~~
~~fluoropolymer(s), such as expanded, sintered PTFE. Broadly, the method~~
~~comprises the step of radially shrinking the reinforcement tape layer.~~The
graft includes a base graft and a reinforcing tape applied thereto. The
10 tape may be spirally wrapped about the graft or spirally wrapped into a
tube about ~~of the graft, or the entire tape reinforced graft, after sintering~~
~~thereof. Such radial shrinkage of the reinforcement tape layer, or of the~~
~~entire graft, renders the~~ a cylindrical mandrel and then applied to the
exterior of the graft. Radial shrinkage of the combined base graft and
15 tape, or of the reinforcing tape tube, renders the vascular graft
subsequently radially enlargeable by more than 5%, without tearing or
breaking of the reinforcement tape layer of the graft. Radially
enlargeable grafts of the present invention may be combined with various
types of stents or anchoring systems, to form endovascular graft devices
20 which are transluminally insertable and implantable within the lumen of a
host blood vessel. Alternatively, radially enlargeable grafts of the present
invention may be implanted by way of traditional surgical graft
implantation techniques, without any radial enlargement of the graft at
the time of implantation, so as to take advantage of the improved
25 strength properties and suture-holding properties of the radially-shrunken
tape-reinforced grafts of the present invention.